

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 08/94-231
FILING DATE NOV 10 1997
APPLICANT(S)

CLAIMS

CLAIM	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3	1		1			
4		1		1		
5	4		1			
6	4		1			
7	1		1			
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100						
TOTAL IND.		2				
TOTAL DEP.	16					

2
16